



**Testimony for FY2025-2026 Performance Oversight Hearing for
the Department on Disability Services Rehabilitation Services Administration
Committee on Facilities**

**Written Testimony of Disability Rights DC at University Legal Services
Chloe Peeples, Staff Attorney
February 26, 2026**

Good morning, Chairperson Lewis George and members of the Committee on Facilities. Thank you for the opportunity to provide testimony today. My name is Chloe Peeples, and I am a Staff Attorney at Disability Rights DC (DRDC) at University Legal Services, the Protection and Advocacy Program for people with disabilities in the District of Columbia. I am part of DRDC's Client Assistance Program ("CAP"), a federally-designated program that provides free legal representation to individuals who are seeking services from the District's Rehabilitation Services Administration ("DC RSA"). Accordingly, we represent numerous DC RSA clients each year and have insight into some of the chief client complaints regarding the agency. I am also a member of the State Rehabilitation Council, which reviews, evaluates, and advises DC RSA regarding its performance and effectiveness in delivering services.

We know that DC RSA has worked to improve its services for District residents over the last several years, and we want to recognize DC RSA's commitment to improving access to and provision of services to clients. However, DC RSA continues to lag behind almost every other state vocational rehabilitation agency in the country in terms of WIOA Performance Assessment indicators.¹ In addition, it appears that the number of people placed in employment by DC RSA that remained employed for 90 calendar days or more has decreased by over 50% in the last three years.² While DDS attributes this decrease to the impact of the COVID-19 pandemic,³ the past three years all occurred post-COVID-19 pandemic. It is also unclear why DDS's response focuses on conducting more in-person outreach,⁴ as serving more people does not equate to being able to place more people in successful employment.

There remain some persistent problems as well as some new issues we would like to bring to the Committee's attention: (1) high caseloads, particularly in

¹ See Rehabilitation Services Administration WIOA Performance Assessment Results, PY 2024, [Accountability | Rehabilitation Services Administration](#). There are five WIOA Performance Indicators: Measurable Skill Gains Rate, Employment Rate – 2nd Quarter After Exit; Median Earnings – 2nd Quarter After Exit; Employment Rate – 4th Quarter After Exit; and Credential Attainment Rate. Compared to all other state vocational rehabilitation agencies, DC RSA ranks in the bottom quartile for Measurable Skill Gains (36%), third to last in Employment Rate – 2nd Quarter After Exit (36%), third to last in Employment Rate – 4th Quarter After Exit (33%), and sixth to last in Credential Attainment Rate (26%). DC RSA does rank in the top half for Median Earnings – 2nd Quarter After Exit (\$5,575.00).

² See DDS Performance Oversight Pre-Hearing Questions and Responses, #137, at page 56.

³ *Id.*

⁴ *Id.*

the Transition Unit, that make it impractical for DC RSA counselors to devote sufficient individualized attention to cases; (2) a pattern or practice of telling clients that the employment goal on their IPE does not matter, but then using that employment goal as a reason to deny services; and (3) DC RSA's lack of transparency in agency-wide issues that impact client services, most recently, a tumultuous transition of case management systems that led to paused services for clients without explanation.

First, the high caseloads for DC RSA counselors do not allow for the kind of individualized and intensive case management that is often sought and required by clients, particularly in the Transition Unit.⁵ DRDC repeatedly hears from clients that they wish their counselor was more invested in their case, would take the time to get to know them and their struggles, and check-in with them instead of approving payment for a service and disappearing. DRDC has testified over the years that clients have issues getting in touch with their DC RSA counselors, and that clients are not getting calls or emails back for weeks at a time. This remains an issue, and DRDC believes part of the problem stems from the high caseloads

⁵ DDS has stated in past Performance Oversight Hearings that their average caseload sizes are typical among VR agencies. This may be true. But in DC, it has not translated to adequate WIOA Performance Indicators, and DRDC has spoken with several DC RSA counselors who state that they are too busy to commit to a biweekly phone check in with a client.

that DC RSA counselors are expected to maintain.⁶ This is particularly acute in the Transition Unit. Transition Unit counselors are expected to manage an average caseload of 203 or 230 cases⁷ – that’s over 200 transition-age youth that are seeking pre-employment transition services (“pre-ETS”) or general vocational rehabilitation (“VR”) services to prepare them for their transition out of high school.⁸ Other DC RSA Units are only responsible for general VR cases. Looking at the Transition Unit breakdown, Transition counselors are expected to maintain a general VR caseload that is higher than almost every other Unit, without counting their pre-ETS caseload.⁹ It is essential that students and transition age youth receive comprehensive and individualized VR services. Studies show that early and intensive VR services improve the rate of competitive, integrated employment in the future.¹⁰ Without more manageable caseloads, it does not seem possible for

⁶ See DDS FY25-26 Performance Oversight Pre-Hearing PDF Attachments, #172, at 853. The average caseload size did decrease in FY25, with more vocational rehabilitation counselors in each unit. However, it increased again in the first quarter of FY26. DDS continues to have consistent staff turnover, with 26 separations in FY25 and only 22 hires, and 6 separations in FY26 with only 3 hires. DDS FY25-26 Performance Oversight Pre-Hearing PDS Attachments, #3, at 16.

⁷ DDS FY25-26 Performance Oversight Pre-Hearing PDF Attachments, #172

⁸ *Id.*

⁹ Transition Unit 1 counselors are currently responsible for an average of 108.4 Pre-ETS cases and 121.8 VR cases. Transition Unit 2 counselors are currently responsible for an average of 75.1 Pre-ETS cases and 128.2 VR cases. Without counting pre-ETS cases, the only other Unit that comes close in just general VR cases is the Supported Employment Unit, with an average of 123 cases. General VR Unit 2 has an average caseload size of 100, General VR Unit 3 has an average caseload of 83, General VR Unit 4 has an average caseload of 103, and General VR – Sensory Unit has an average caseload of 67. *Id.*

¹⁰ See, e.g., Valerie L. Mazzotti, et al., *Secondary Transition Predictors of Postschool Success: An Update to the Research Base*, 44 Career Dev. & Transition for Exceptional Individuals, 1, 47-64 (2020), <https://doi.org/10.1177/2165143420959793>; Joshua P. Taylor, et al., *The Impact of Pre-Employment Transition and Individualized Vocational Rehabilitation Services on Employment Outcomes for Youth With Disabilities*, 48 Career Dev. & Transition for Exceptional Individuals 2, 128-139 (2025), <https://doi.org/10.1177/21651434241239967>.

Transition Unit counselors to deliver the extent of services that DC youth deserve.¹¹

As an example, DRDC heard from a parent who was desperately trying to get his high school aged child with disabilities more work-based learning experiences to help prepare him for employment. He had reached out to the DC RSA counselor assigned to his son's school asking about opportunities or internships that his son could be connected to. The DC RSA counselor's response was that he didn't know of any. The counselor did not investigate further opportunities, follow up, or even connect with the student. Work-based learning opportunities, including internships, are a key component of pre-employment transition services that DC RSA is required by law to provide.¹²

Second, DRDC is concerned about the number of cases where a client or their parent has been told that the employment goal doesn't matter when signing an Individualized Plan for Employment ("IPE"). It is even more concerning when a client or their parent has been told this, and then the DC RSA counselor uses that employment goal as a basis to deny services. To add insult to injury, the signed IPE

¹¹ While DRDC is aware of budgetary constraints within DDS that make it difficult to hire more vocational rehabilitation counselors, DDS found it within the budget to add a second VR Program Manager position in December 2024. DRDC was surprised that this was not included in DDS's response to DDS FY25-26 Performance Oversight Pre-Hearing question #1.c, as it was not included in last year's question regarding organizational changes either.

¹² 29 U.S.C. § 733(b); 34 C.F.R. § 361.48(a)(2); *see also* 29 D.C. Mun. Regs. § 113.1(b).

is used as evidence that the client agreed to everything the IPE entailed, including the employment goal and that the requested services are not necessary. For example, DRDC has seen this used in several cases for transition age students with intellectual disabilities seeking support from DC RSA to attend a Comprehensive Transition and Postsecondary Program for Students with Intellectual Disabilities (“CTP”), as defined by the Higher Education Opportunity Act of 2008.¹³ Students will have “placeholder” employment goals put on their IPEs because their DC RSA counselor says that the goal itself doesn’t matter, and they just need to have one, like “Customer Service Representative” or “Janitor,” to get services. But then when they seek support for a CTP after finishing high school, the DC RSA counselor denies support saying that it’s not necessary to meet the student’s IPE employment goal. CTPs are incredibly valuable postsecondary programs where students with intellectual disabilities attend over half their classes with their

¹³ “The term ‘comprehensive transition and postsecondary program for students with intellectual disabilities’ means a degree, certificate, or nondegree program that meets each of the following: (A) Is offered by an institution of higher education. (B) Is designed to support students with intellectual disabilities who are seeking to continue academic, career and technical, and independent living instruction at an institution of higher education in order to prepare for gainful employment. (C) Includes an advising and curriculum structure. (D) Requires students with intellectual disabilities to participate on not less than a half-time basis as determined by the institution, with such participation focusing on academic components, and occurring through 1 or more of the following activities: (i) Regular enrollment in credit-bearing courses with nondisabled students offered by the institution. (ii) Auditing or participating in courses with nondisabled students offered by the institution for which the student does not receive regular academic credit. (iii) Enrollment in noncredit-bearing, nondegree courses with nondisabled students. (iv) Participation in internships or work-based training in settings with nondisabled individuals. (E) Requires students with intellectual disabilities to be socially and academically integrated with non-disabled students to the maximum extent possible.” 29 U.S.C. § 1140(1).

nondisabled peers. CTPs have a heavy job skill and career development focus, while also focusing on independent living, self-advocacy, and social skills. DC does not have a CTP or anything that resembles it.¹⁴ DDS's position as recently as December 9, 2025, has been that DC RSA will never support a CTP because it is a pre-employment transition service and it's not a program that ends in a degree. This is contrary to law and policy. The Department of Education made it clear that it expects state VR agencies to provide support for CTPs.¹⁵ DC is one of the few areas in the country that does not have a CTP, so DC RSA must provide support for students to attend CTPs out of state if necessary for the student to become ready for competitive, integrated employment.

However, this issue with IPE employment goals also happens outside of the CTP context. DRDC had a client with an employment goal which required a bachelor's degree. At the onset of services, he was told by his DC RSA counselor

¹⁴ The program referenced by DDS in its response to Pre-Hearing Question 161.iv, at Montgomery College, is the Graduate Transition Program. It is not a CTP. In order to be a CTP, a school must meet the requirements listed in footnote 10. Montgomery College's program does not meet those requirements. It is a segregated class that focuses on basic academic skills. See Montgomery College, Graduate Transition Program, <https://www.montgomerycollege.edu/workforce-development-continuing-education/developmental-education/gtp.html>.

¹⁵ “. . . [T]he vocational and other training services specified in final § 361.48(b)(6) encompass tuition and other services for students with intellectual or developmental disabilities in a Comprehensive Transition and Postsecondary Program for Students with Intellectual Disabilities, as defined by the Higher Education Act of 2008.” State Vocational Rehabilitation Services Program, 81 Fed. Reg. 55678 (Aug. 19, 2016); see also Office of Special Education and Rehabilitative Services, Guidance on Requirements Under the IDEA and Rehabilitation Act (Jan. 2025), https://www.govinfo.gov/app/details/GOVPUB-ED1_200-PURL-gpo237039; Department of Education, Q&A: Increasing Postsecondary Opportunities and Success for Students and Youth with Disabilities (Sept. 17, 2019), <https://sites.ed.gov/idea/idea-files/qa-increasing-postsecondary-opportunities-success-for-students-youth-with-disabilities-sept-17-2019/>.

that they would start by approving an associate's degree for a stepstone employment goal, and after the client completed those years, they would revisit the IPE to add a bachelor's degree. This was inappropriate as DC RSA is supposed to include all services that are needed to meet an employment goal on an IPE.¹⁶ By the time the client finished his associate's degree, he was under the impression that he was already approved to continue for his bachelor's degree and it just needed to be added to his IPE. That was not the case, as DC RSA attempted to argue that a bachelor's degree wasn't needed for the employment goal that had been added as a stepstone goal. It was a battle to get support for the bachelor's degree approved, notwithstanding the conversations that occurred at the onset of services and that his actual employment goal always required a bachelor's degree.

Clients inherently trust what their DC RSA counselor tells them. If their counselor says that the employment goal doesn't really matter, they take them at their word. When it later becomes the basis for a denial of services, clients are left feeling confused and betrayed. DC RSA must provide adequate internal training to ensure counselors do not tell their clients that an employment goal doesn't

¹⁶ DC RSA acknowledges this in its response to Pre-Hearing Questions 138 and 139. DDS Performance Oversight Pre-Hearing Questions and Responses, Nos. 138-139, at page 56. Historically, this is not how DC RSA has operated, so DRDC is heartened to see that DC RSA is changing its policy. Previously, DC RSA would not put a service on an IPE until it was ready to be paid for, such as school tuition by semester. However, pursuant to federal law, money from DC RSA is obligated at the time a service authorization is sent, not when it is placed on an IPE. 34 C.F.R. § 76.707. Placing all services needed to meet an employment goal on an IPE is consistent with federal law and policy and should be DC RSA's standard practice moving forward.

matter. Clients have the right to make an informed choice about their employment goal and all the services needed to meet that goal.

Third, DRDC is concerned by the lack of transparency at DDS when it comes to events that impact client services. This happened when there was an agency-wide pause on funds in 2024, and it happened again in 2025 when the case management system transition from System7 to InFormed caused an avalanche of problems. The Performance Oversight responses from DDS indicate that there were several agency-wide actions that took place.¹⁷ While there may have been meetings with the Libera team, it is my understanding that the main response involved adding individual errors to a list to be dealt with one-by-one. The issues caused weeks of delays, uncertainty and frustration for clients, and stress for the DC RSA counselors attempting to resolve the issues themselves. Clients were told there were technical difficulties adding services to their IPEs or issuing authorizations but could not get further clarity on what the technical issues were, how long they would take to resolve, or even what action was being taken to resolve them. Clients were instead placed in an indefinite waiting period. I do not doubt that DC RSA counselors were doing everything in their power to resolve the

¹⁷ DDS Performance Oversight Pre-Hearing Questions and Responses, #179, at pages 71-73. DDS's response to question 179.e that no IPEs were delayed during the system transfer is incorrect. An approved service for one of my clients was unable to be added to an IPE for 12 business days after the new system was supposed to be up and running.

technical issues, but they didn't seem to receive adequate support from DDS leadership. Issues have continued through Fall and Winter 2025, further contributing to the diminished capacity of DC RSA counselors. When internal issues impact client services, clients need to be fully informed and kept up to date about how the issues are being solved and anticipated dates of resolution.

Thank you again for this opportunity to submit testimony on these important issues. Please feel free to contact Chloe Peeples at (202) 547-0198, ext. 120 or cpeeples@uls-dc.org with additional questions.